

SES PROVIDER APPLICATION**Part B****PROVIDER SERVICE SUMMARY**

(This information will be available on-line to parents, schools, and the general public.)

PROVIDER INFORMATIONNAME OF PROVIDER: ~~New Avenues, LLC dba~~ Sylvan Learning Center dba New Avenues, LLC

MAILING ADDRESS: 1051 Kingshighway, Suite 4 - 5

CITY: Rolla STATE: Missouri ZIP CODE: 65401

PHONE NUMBER: (573) 426-3974 FAX NUMBER: (573) 426-3976

E-MAIL ADDRESS: slc724@fidnet.com

PRIMARY CONTACT INFORMATION

NAME: Robin D. Baldwin PHONE NUMBER: (417) 257-1717

E-MAIL ADDRESS: slc724@fidnet.com

SERVICES**Provider status—check all that apply:**

- ☒ For-profit organization
☐ Non-profit organization
☐ Faith-based organization

- ☐ School district
☐ School building
☐ Individual
☐ Other: _____

Areas to be served by provider:

- ☐ All school districts in Missouri
☒ Specific districts or counties. Please list: Pulaski, Phelps, Crawford, Dent, North Texas and Maries Cc

Number of sessions per week: 15**Minimum/maximum numbers:**

Minimum number of students required before offering services: One
 Maximum number of students to be served at a session: Ten

Cost per session:**Proposed location of service delivery:**

- ☐ Student's school site (if negotiated with the district)
☒ Provider site
☐ Other--explain: _____

If service delivery is not at the student's school, is transportation provided? If so, is there a separate fee?
 (Note: Districts are not required to provide or pay for transportation).

Transportation is not provided

Certification of instructors:

- ☒ Baccalaureate degree in education
☒ Baccalaureate degree in related field of instruction. Please list related field(s): Math and Sciences
☐ Reading Specialist
☐ Other: _____

Additional education and/or experience:

- ☒ Masters level degrees or above in either reading or mathematics
☒ Missouri teacher certificated/licensed teachers
☒ Experience teaching students with specific disabilities
☒ Experience teaching LEP students
☐ Ability to speak languages other than English. Please list: _____
☐ Other: _____

Tutoring subjects available:

☒ Reading ☒ Writing ☒ Math

Grade Levels Served:

☒ K-2 ☒ 3-5 ☒ 6-8 ☒ 9-12

Title or description of tutoring curriculum utilized: _____

Time of Service:

☐ Before School
☒ After School
☒ Weekends
☒ Summer
☐ Other: _____

Mode of Instructional Delivery:

☐ Individual one-on-one tutoring
☒ Small group instruction (2 to 5 students)
☐ Large group instruction (6 to 10 students)
☐ On-Line/Web-based
☐ Other: _____

Specifics of reporting to parents & school (check all that apply):**Method:**

☒ letters
☒ phone calls
☒ conference with parents
☒ conference with parents & school
☐ other: _____

Frequency:

☐ weekly
☒ bi-monthly
☒ monthly
☒ other: Every 36 hours of Ins

Specific Student Populations Served:

If your organization has provided supplemental services to any of the following groups, please check the corresponding box.

☒ Low-income students
☒ Minority students
☐ Migrant students
☐ Limited English proficient students (LEP)
☒ Special education students
☐ Other—describe: _____

☐ Please indicate if you wish to only be considered for service toward specific subgroups of children because of special expertise in some areas.

Indicate subgroups: _____

Effectiveness:

Give a brief description of evidence you have that demonstrates effectiveness of your program/services. (This will be shared with parents).

Sylvan Learning Centers are located throughout the US and operate on a "Skills mastery" basis rather than subject

based. The programs offered are highly successful and effective in improving missed "skills" and are designed to

integrate with normal classroom activities on a supplemental basis through "after-school" instruction.